



IPR, Legal & Ethical Matters Cell

Invention Disclosure Form (Industrial Design)

1. Title of Industrial Design:					
2. Details of Applicant(s):					
Full Name	Designation & Department Affiliation	Citizenship	Address	Teleph one and Email	Nature of Contribution
3. Details of Inventor(s):					
Full Name	Designation & Department Affiliation	Citizenship	Address	Teleph one and Email	Nature of Contribution
4. Stage of Invention	Only Hypothesis <input type="checkbox"/>	Preliminary experiments <input type="checkbox"/>	Proof established <input type="checkbox"/>	Prototype is completely ready <input type="checkbox"/>	
5. Funding resource (Please Mention)	Seed Money <input type="checkbox"/>	Government Agency <input type="checkbox"/>	Public Private Partnership <input type="checkbox"/>	Other(s) <input type="checkbox"/>	
6. Any pre-existing agreement signed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If 'Yes' please enclose the copy		
7. Novelty / Originality search Done	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If 'Yes' please enclose the copy		
8. Potential market area of your invention	Pharmaceutical	<input type="checkbox"/>	9. Focus group of your invention	Pharma Industry	<input type="checkbox"/>
	Chemistry	<input type="checkbox"/>		Chemical Industry	<input type="checkbox"/>
	Biotechnology	<input type="checkbox"/>		Agri Industry	<input type="checkbox"/>
	Agriculture	<input type="checkbox"/>		R & D platform	<input type="checkbox"/>
	Electrical	<input type="checkbox"/>		IT Industry	<input type="checkbox"/>
	Mechanical	<input type="checkbox"/>		Food Industry	<input type="checkbox"/>
	Computer sciences related	<input type="checkbox"/>		Consumer	<input type="checkbox"/>



	Others (specify)			Others (specify)
10. Do you require any fund for developing your invention (mention if you have requested anywhere)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Any Other	
11. Any provision/agreement with funding source to share IPR charges Specify				

Undertaking

Hereby I/we accept that this is a novel finding of my/our group for which I/we take total responsibility of the ownership. I/We also admit that this part of work is not published, presented in any conference, and/or abstracted in print or electronic media. All the information given above is true to the best of our knowledge.

☐ By checking this box hereby, I/we accept the responsibility for electronic transmission of record.

Name and Signature with Date

(With original signature please send the application to IPR Cell for decision)

S. No.	Applicant(s)	Signature with Date
1		
2		
3		
4		
5		
S. No.	Inventor(s)	Signature with Date
1		
2		
3		
4		
5		

Please attach the following documents (Check the box to indicate the enclosure)

☐ Name of article

☐ Title of the invention: Provide a descriptive title for design (within 10 words).

☐ Detailed description of the design: Provide the novelty and innovative features of the design. For understanding of nature and novelty of the article.

☐ Details about Industrial usage and its application in possible industries

☐ Abstract of the invention

☐ Background of the invention

☐ Soft copies of colour Photographs / Drawings (with white background) depicting the design exactly through the following views:



1. a front view
2. a rear view
3. a left side view
4. a right side view
5. a top view
6. a bottom view and
7. a top perspective view (take any top left or top right-angle view at 45 degree from top position)